

The table of contents in the front of each volume is extensive so that there is very little difficulty in finding a specific topic. Also, the volumes are well indexed in the back of each volume. Each section has a rather extensive bibliography which is excellent for reference material. The authors quote rather widely, particularly from the European literature as well as from some of the major American journals. The most recent references go up to 1964.

In summary, I think this is an excellent book that is well written and covers essentially all of the subjects in the field of renal disease. It would be a very good reference book for nephrologists or reference material on renal diseases for a large medical service or medical group.

STEWART SHANKEL, M.D.

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**THE PSYCHIATRIC CONSULTATION**—Werner M. Mendel, M.D., Professor of Psychiatry, University of Southern California School of Medicine, Los Angeles, California, and Philip Solomon, M.D., Clinical Professor of Psychiatry, Harvard Medical School, Boston, Massachusetts. Grune & Stratton, Inc., 381 Park Avenue South, New York, N.Y. (10016), 1968. 221 pages, \$9.75.

The editors of this volume note that the growing interest of the public in psychiatry, together with recent social legislation making it possible for the lower economic groups to receive psychiatric care for conditions other than psychosis, is placing a tremendous burden on the mental health manpower pool. They suggest that as psychiatric training centers cannot possibly train enough psychiatric specialists to serve the treatment and prevention needs of the population, the emphasis must be on the psychiatrist as the leader of a mental health treatment team and as a consultant to the non-psychiatrist physician and others in the helping disciplines. Dr. Solomon considers the symposium on which this book is based to be "the first substantial and nationwide recognition of the importance of the general field of consultation in psychiatry."

The objective of the book is to define the process of consultation, evaluate techniques of teaching consultation, and present some specialized techniques of consultation in various fields. Dr. Mendel notes that most educators in the field of psychiatry agree on a model of the ideal consultation but recognize the great disparity between this model and actual consultation practice (a situation that undoubtedly exists in other medical specialties, as well). The difference between model and practice is attributed to the present lack of interest and research emphasis in this aspect of psychiatry. Dr. Henry Brosin lists a series of common complaints made by medical colleagues that psychiatrists should seriously consider. Whether or not they are based entirely on fact, they do reflect the image that some psychiatrists project and that can influence the effectiveness of the psychiatrist as a consultant.

The first section of the book deals with teaching the consultation process, and emphasizes that variations in teaching techniques occur for the most part in connection with the different levels of consultation—patient centered, colleague centered, and agency centered. The second, and larger, part of the book deals with special techniques and situations in which the psychiatric consultation takes place—a county general hospital, a community agency, schools and colleges, government agencies, courts, family counseling services, the clergy, and industry. The list is not exhaustive but could be expanded to include prisons, poverty programs, emergency clinics, alcohol and drug abuse clinics, housing and resettlement agencies, and many more.

With 18 articles by contributors with differing points of view, this volume suffers from the usual shortcomings of such a presentation—duplication, lack of continuity of theme, and a disjointed quality. It does, however, as the editors intended, represent a beginning in the structuring and systematizing of a new discipline. The expansion of psychiatry to touch nearly every area of human activity has taken place over a long period without formal teaching or organization of its consultation aspects. This book discusses many of the basic principles, but as with any clinical subject, the content can be no substitute for clinical practice under the supervision of an expert. It is in the clinical situation that one learns.

ALEXANDER SIMON, M.D.

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**ORTHOPEDIC DISEASES**—Physiology, Pathology, Radiology—Third Edition—Ernest Aegerter, M.D., Professor of Pathology and Director of the Department of Pathology, Temple University Health Sciences Center; Professor of Orthopedic Pathology, University of Pennsylvania Graduate School of Medicine; Chief in Pathology, Philadelphia General Hospital; Consultant in Pathology, Frankford Hospital, United States Naval Hospital, Veterans Administration Hospital, Shriner's Hospital for Crippled Children, Philadelphia; Pennsylvania State Hospital for Crippled Children, Elizabethtown, Pennsylvania; the A. I. duPont Institute, Wilmington, Delaware; and John A. Kirkpatrick, Jr., M.D., Radiologist, St. Christopher's Hospital for Children; Professor of Radiology, Temple University Health Sciences Center; Radiologist, Children's Heart Hospital; Attending (Radiology), Veterans Administration Hospital, Philadelphia. W. B. Saunders Company, West Washington Square, Philadelphia, Pa. (19105), 1968. 906 pages, \$23.00.

This third edition of *Orthopedic Diseases*, by Aegerter & Kirkpatrick represents a further enlargement and improvement of their previous excellent text. The first five chapters are an excellent and logical presentation of the basic material of histology, embryology, physiology, and the interpretation of roentgenograms.

In each of the following sections a logical presentation of the disease entity is made, with first a description of the entity, followed by roentgenographic manifestations, with excellent reproductions of the roentgenograms, the description of the pathologic morphology, accompanied by clear reproductions of the photomicrographs, and finally, a discussion of the prognosis.

The material covered in this portion of the book is: first, disturbances of skeletal development and disturbances in the normally formed skeleton; tumors and tumor-like processes; and finally, diseases of joints and muscles and soft-part tumors.

I find this book to be excellent for medical students to give them a clear and concise picture of this type of orthopedic problem. It should be in the library of every orthopedic resident and every practicing orthopedic surgeon.

CHARLES BECHTOL, M.D.

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**TEXTBOOK OF OTOLARYNGOLOGY**—Third Edition—David D. DeWeese, M.D., Professor and Chairman of the Department of Otolaryngology, University of Oregon Medical School, Portland, Oregon, and William H. Saunders, M.D., Professor and Chairman of the Department of Otolaryngology, The Ohio State University College of Medicine, Columbus, Ohio. The C. V. Mosby Company, 3207 Washington Boulevard, St. Louis, Mo. (63103), 1968. 457 pages, \$11.50.

Intended primarily for the medical student and the general practitioner, the first edition of this book was very well received. It was published in 1960 when the existing texts had gone through many inadequately revised editions. The third edition of DeWeese and Saunders suffers from the same deficiencies as the texts its first edition was intended to replace.

Although the design and color of the cover are new, the titles, number and order of the chapters are identical with those of the first edition. None of the chapters has been extensively rewritten. A small number of illustrations have been replaced or deleted; several new ones have been added. The most extensive changes are in Chapter 6, in which the new laryngeal illustrations are a significant improvement, and in Chapter 9, to which four charts covering tracheotomy care have been added. A section of mediastinoscopy, consisting of one short paragraph, one illustration, and one reference, has been added to Chapter 10. A few additional references have been added to the bibliographies at the ends of some of the chapters.

Despite the inadequacy of the changes, we are indebted to Dr. DeWeese and to Dr. Saunders for providing us with the best available American otolaryngology text for medical students and general practitioners. Current owners of editions one or two need not replace them. Anyone seeking a good, basic otolaryngology text would do well to consider the new edition of DeWeese and Saunders. It is the hope of the reviewer that the fourth edition will be adequately revised.

CHARLES P. LEBOW, M.D.

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**PEDIATRIC THERAPY**—Third Edition—Harry C. Shirkey, B.S. (Pharm.), M.D., F.A.A.P. (Editor), Director, The Children's Hospital of Birmingham, Alabama; Professor and Director, Division of Clinical Pharmacology, Department of Pediatrics, and Associate Professor, Department of Pharmacology, Medical College of Alabama, Birmingham, Alabama; Professor and Chairman, Department of Pharmacology, Samford University, Birmingham, Alabama; Member, Revision Committee, and Chairman, Pediatric Panel, Pharmacopeia of the United States. The C. V. Mosby Company, 3207 Washington Boulevard, St. Louis, Mo. (63103), 1968. 1294 pages, \$25.00.

Almost any physician who treats children needs a textbook devoted exclusively to pediatric therapy. Currently two such books are available. One of these, *Pediatric Therapy*, Harry Shirkey, editor, is now in its third edition. The book is divided into the traditional categorical arrangements of diseases (respiratory system, blood, genitourinary system, etc.), and the principles and all practical details of a complete therapeutic regimen are set forth. In addition, there are more general chapters which deal with drug treatment, drug reactions, treatment of symptoms, etc., an extensive table of poisons and their treatments, and a very extensive table of recommended drugs and dosages. Since there are 89 contributing authors, it is not surprising that the end result is a bit uneven in quality; however, most of them succeed in presenting a practical and complete approach to the delivery of care to sick children. The presentations benefit from very liberal use of illustrative figures and lists of pertinent references.

Since the decision for most physicians who treat children will not be whether to buy such a book but, rather, which one should be bought, some comparison with its main competitor, *Current Pediatric Therapy*, Drs. S. S. Gellis and B. Kagan, editors, seems appropriate. In general, these books are similar, with a few distinct differences. The Gellis-Kagan book deals solely with specific disease entities and lacks the extensive discussions of general care given in the first section of the Shirkey book, and also does not make use of illustrative figures. On the whole, the Gellis-Kagan book is more scholarly in its approach to specific diseases, while the Shirkey book places more emphasis on the practical details of total patient care.

If one has the second edition of the Shirkey book,

enough new information is not offered in the third edition to justify its purchase. However, compared to the first edition, there are enough new and/or significantly revised chapters so that it could be replaced with the third.

RODERIC H. PHIBBS, M.D.

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**MONOCLONAL AND POLYCLONAL HYPERGAMMAGLOBULINEMIA**—Clinical and Biological Significance—Jan Gösta Waldenström, Head of the Department of Medicine in Malmö at the University of Lund. Vanderbilt University Press, Nashville, Tenn. (37203), 1968. 223 pages, \$6.95.

This book is a compact exposition of the disorders of immunoglobulins by a most distinguished clinician. As in most of his publications, it is written in an informal, chatty style, in which he allows access to his thoughts, most of which are born out of long and extensive clinical experience. Throughout the book, the author leans heavily on this experience and presents a large amount of case material. Although he constantly refers to the available literature, it is his data which shapes his thinking. This is probably the book's greatest strength. It is also probably its weakness in that a large body of clinical material on these disorders from other centers is summarized only briefly.

The book covers the following materials. The nomenclature of the gamma globulins; the nature of (M) components and so called paraproteins; the clinical importance of monoclonal vs. polyclonal hypergammaglobulinemias; the diagnostic importance of the estimated sedimentation rate; the incidence of the monoclonal disorders of multiple myeloma macroglobulinemia, etc.; some discussion of the metabolic problems of these disorders; a brief section on cryoglobulins; an important discussion of monoclonal essential hypergammaglobulinemia and material on polyclonal hypergammaglobulinemias including autoimmune diseases, purpura hypergammaglobulinemia, circulating anticoagulants and sarcoid like disease. The book ends with a section on the etiology and metabolic aspects of monoclonal disease which includes some of the author's thoughts on malignant disease in general.

The chapter on the nomenclature is somewhat out of date and the new information on IgG subclasses is not included. Further, the current concepts of heavy chain disease i.e., proteins which are more than just a Fc fragment and are probably heavy chains with large areas of Fd fragment deletion were not available at the time of his writing. The author's discussion of the term paraprotein and the evidence for and against it are timely. He favors the concept that M components are antibody molecules which we must find the antigen. He devotes an entire chapter to the problem of incidence and etiology of these disorders. This information has been unavailable (in the form presented) and as such is worthy of the reader's attention. The chapter on metabolic problems was disappointing in that no discussion of the role of the kidney in the catabolism of gammaglobulin and Bence Jones proteins was included. This is an important subject which has direct bearing on the etiology of myeloma renal disease. The discussion on hypercalcemia, however, is more to the point and raises the question of the presence of a calcium mobilizing factor in these patients.

The information provided about a monoclonal essential hypergammaglobulinemia as a clinical problem is important in this day. The availability of potent drugs which, when indiscriminately used on patients who have not had myeloma, can cause severe and fatal iatrogenic disease. The existence of, and criteria for, diagnosis of